



FORM C - PRIVATE PROPERTY DRAINAGE ASSISTANCE GRANT APPLICATION

To receive financial support to address current drainage problems on private property, please complete and submit this form and application fee of \$10 prior to starting the work. You will be notified if your grant is approved. Following completion of the work, a Request for Reimbursement must also be submitted.

| | | |
|--|--|-------------------------------|
| Property Owner Information (Please print or type) | | Stormwater utility Account #: |
| | | |
| Name: | | |
| Mailing Address: <i>(Street or PO Box #)</i> | | |
| City, State, ZIP Code: | | |
| Phone: | | |
| Email Address: | | |
| Property Information (Please print or type) | | |
| Parcel Address: <i>(if different from above)</i> | | |
| Residential Property: | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Project Scope of Work | | |
| Describe the purpose of the project and the reason this project is needed. | | |
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Submit the following with this application:

- Photographs of existing site conditions
- Site plan showing property lines, houses, buildings, pavements, and proposed improvements
- Itemized bids of three qualified contractors

| | | | |
|---|--|----------------|-------|
| Contractor 1 <input type="checkbox"/> Selected by Owner | | | |
| Name: | | Bid Amount: | |
| Address: | | Phone: | |
| | | Email address: | |
| Contractor 2 <input type="checkbox"/> Selected by Owner | | | |
| Name: | | Bid Amount: | |
| Address: | | Phone: | |
| | | Email address: | |
| Contractor 3 <input type="checkbox"/> Selected by Owner | | | |
| Name: | | Bid Amount: | |
| Address: | | Phone: | |
| | | Email address: | |
| <p><i>The Applicant signature below affirms the applicant has read the Credit and Grant Manual and wants to participate in the Stormwater Utility Grant Program in accordance with the policies and procedures. The applicant gives City representatives permission to enter property to inspect the site conditions before, during and after construction of the improvements to evaluate conditions as proposed in this application.</i></p> | | | |
| Signature of Owner (Applicant): | | | Date: |



Grant Submittal Information

Public Works, Attn: Stormwater
3505 North Dries Lane
Peoria, Illinois 61604

<https://peoriagov.org>
stormwater@peoriagov.org
(309) 494-8800

FOR OFFICE USE ONLY

| City Evaluation of Application | | PIN: |
|---|---|------|
| Has the Applicant provided the required owner and property information? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Is the scope of the project compatible with the PPDA Grant purpose? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are three contractor bids submitted with the application? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Is a site plan and photographs included with the application? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Is the project necessitated by upstream runoff? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Is the project in a flood plain? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Has a PPDA Grant been issued for this property before? | <input type="checkbox"/> Yes <input type="checkbox"/> No Date: _____ | |
| Has the application fee been paid to the City? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Is the stormwater utility account in good standing (bills paid)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Review By: | Approval Date: | |
| Grant Amount: \$ _____ | Total Project Cost: \$ _____ | |
| If the application is denied, inform the applicant in writing (by mail or email) the reason for the denial. | Denial Date: | |